

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**May 06, 2005 8:00 am**  
**Secretary of State**

05-06-2005 90101 029 \*\*\*\*75.00



**DOCUMENT # N03000008786**  
 1. Entity Name  
**GOD'S BROTHERLY LOVE OUTREACH MINISTRIES, INC.**

Principal Place of Business      Mailing Address  
**1311 17TH STREET CT EAST**      **1311 17TH STREET CT EAST**  
**BRADENTON FL 34208**              **BRADENTON FL 34208**

2. Principal Place of Business      3. Mailing Address  
**5023 21ST Way East**      **5023 21ST Way East**  
 Suite, Apt. #, etc.              Suite, Apt. #, etc.

City & State      City & State  
**Bradenton Fl.**      **Bradenton Fl.**  
 Zip      Country      Zip      Country  
**34203**      **manatee**      **34203**      **manatee**

4. FEI Number      Applied For  
**54-2129737**      Not Applicable

5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**SUTTON, CHRISTINA**  
**1311 17TH STREET CT EAST**  
**BRADENTON FL 34208**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City      **FL**      Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  
 SIGNATURE *Christina Sutton*      DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable      (NOTE: Registered Agent signature required when reinstating)

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2005**

9. Election Campaign Financing Trust Fund Contribution.       **\$5.00** May Be Added to Fees

**Make Check Payable to Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>SUTTON, JAMES</b>	
STREET ADDRESS	<b>1311 17TH STREET CT EAST</b>	
CITY-ST-ZIP	<b>BRADENTON FL 34208</b>	
TITLE	<b>VP</b>	<input type="checkbox"/> Delete
NAME	<b>SUTTON, CHRISTINA</b>	
STREET ADDRESS	<b>1311 17TH STREET CT EAST</b>	
CITY-ST-ZIP	<b>BRADENTON FL 34208</b>	
TITLE	<b>C</b>	<input type="checkbox"/> Delete
NAME	<b>SMITH, HENRY</b>	
STREET ADDRESS	<b>1507 1ST AVE EAST</b>	
CITY-ST-ZIP	<b>PALMETTO FL 34221</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Christina Sutton*      Date \_\_\_\_\_      Daytime Phone # \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



1st MOORE      CR2E037 (10/04)